

Australian Government Senate Inquiry into Industry Skills Councils

Submission

Prepared by the Community Services and Health Industry Skills Council CS&HISC is uniquely positioned to broker and harness advice nationally across the diversity of the community services and health industries, and to use this advice in the development of products and information supporting workforce development and reform.

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Introduction

The Community Services and Health Industry Skills Council (CS&HISC) welcomes the Australian Government Senate's *Inquiry into Industry Skills Councils* and the opportunity to profile the role and impact of the work of CS&HISC on the growth and formation of the rapidly expanding community services and health workforce.

Formation of CS&HISC

CS&HISC was first established in the early nineties as the National Community Services and Health Industry Training Advisory Board, and has used its unique position as a national body to lead the introduction of the national qualifications and competency standards in the health and community services industry over the past fifteen years.

Industries

The Australian community services and health industries employ almost 1.2 million workers. Our industries have experienced the fastest workforce growth of all Australian industries in the ten years to 2009 resulting in 20% of all new jobs and 410,800 new workers. This is reflected in the number of publicly funded training positions for the health (HLT) and community services (CHC) Training Packages (*Appendix 1: Publicly funded RTO enrolments in CHC02/99 Community Services Training Package and HLT07/02 Health Training Package*). This level of growth is predicted to continue with a further 211,000 jobs by 2014-2015.

Skills Australia further presents a scenario through *Australian Workforce Futures: A National Workforce Development Strategy* where the community services industry is expected to grow second fastest out of all Australian industries at a rate of 4% per annum until 2025. The two highest growing occupations being welfare associate professionals (2.8% per annum) and carers and aides (2.6% per annum). These occupational classifications reflect roles held by aged care workers, disability workers, mental health support workers, alcohol and other drugs workers, counsellors and home and community care workers.

CS&HISC undertakes a process of continuous improvement of the CHC and HLT Training Packages. This is a major undertaking due to the size and complexity of our industries, and the large number and different types of organisations. Broadly, stakeholder types include government, private and non-government employers, unions, professional associations, peak bodies, regulators, government policy bodies, state/territory government agencies, Australian Government agencies, consumer and carers bodies and education and training providers. (*Appendix 2: Occupational roles within the health and community services industries*).

Consultation and stakeholder engagement

There are now over 160 national qualifications and over 1000 competency standards for community services (CHC08) and health (HLT07) Training Packages reflecting work roles and career pathways. They provide a key foundation for vocational education and training (VET) and represent industry positions, brokered across the diversity of stakeholders, on formation of the workforce needed to meet service delivery demands of the future. CS&HISC has been successful in this work through the application of transparent and thorough consultation across industry at the national level.

Workforce development supporting future client services

In 2008 the CS&HISC released research identifying that for training and skill development to be successful in meeting the needs across the community services and health sectors and

¹ Australian Jobs 2010 www.deewr.gov.au/Employment/ResearchStatistics/Pages/AustralianJobs.aspx

enterprises, key preconditions must be addressed. These preconditions include appropriate funding, employment structures, employee capacity to training, sectoral/group organisations and defined consumer profiles². Through this research the CS&HISC signalled to government and industry that further reform is required to ensure community services and health enterprises are consistently able to implement new work roles and practices required to meet future client needs.

Increasing demand for health and community services is being driven by the ageing of the population, increasing rates of disability and persistent rates of chronic disease more prevalent in older age. Our workforce has approximately 40% of workers trained in the higher education sector (e.g. doctors, nurses and allied health professionals) with the remainder of the workforce either untrained or trained in the VET sector. New combinations of workers and jobs are forming to support the shift in service delivery models that emphasise illness prevention, primary health care settings, community and home-based services and better co-ordination across acute/hospital and other services. This shift is also supported by the emerging rights based focus on delivery of services to people with disability and their families and carers.

Relevance of CS&HISC Skills Development Role

The role of CS&HISC is to ensure work-based skills meet a national quality standard, specifically focusing on client need. CS&HISC identifies, develops and encourages the implementation of these skills. We undertake ongoing review to ensure currency through early-identification of changes in client need and workforce development.

Validity through consultation

Through extensive research and consultation CS&HISC sets the appropriate skills levels required across both the community services and health industries and all sectors. The skills levels encompass entry-level positions through to vocational graduate diploma, and are developed and reviewed by stakeholders working in and with urban, regional, rural and remote communities. The range of stakeholders consulted in all instances include government, private and non-government employers, unions, professional associations, peak bodies, regulators, government policy bodies, state/territory government agencies, Australian Government agencies, consumer and carers bodies and education and training providers.

Ongoing consultation methods include:

- Forums (Rural and Remote Symposium, Health and Community Services transition workshops, Nurses Forum, Support Health Professions Forum, Making A Difference conferences, Accolades Awards, Allied Health pre-conference workshop, Oral Health Forum)
- Regular communications (monthly newsletter, electronic updates and email alerts, faceto-face meetings, teleconferences, website postings)
- Industry Committees (steering committees, industry reference groups). (See Appendix 3: Industry Consultation summary July 2008-June 2010).

CS&HISC has identified the following broad categories of stakeholders in the national training system. Our specific priority stakeholders within the broad groupings including:

- State and Territory Training Agencies and specific Australian Government Departments/Ministries
 - Department of Health and Ageing
 - Department of Human Services
 - Department of Education, Employment and Workplace Relations
 - Department of Families, Housing, Community Services and Indigenous Affairs
 - Attorney General's Department

² CS&HISC 2008, Identifying Paths to Skill Growth or Skill Recession: A literature review on workforce development in the community services and health industries, CS&HISC

- Government employers
 - Australian Health Ministers' Advisory Council
 - Community and Disability Services Ministers' Advisory Council
- Government agencies with regulatory responsibilities relating to the skills of the community services and health workforce
 - Health professional licensing bodies
 - Occupational health and safety authorities
- Other Peak Bodies (See Appendix 4: Other Peak Bodies CS&HISC engages with in the development of research reports, competency development, and training packages reviews)

Case studies

Community Services Training Package, and the Aboriginal and Torres Strait Islander Health Worker qualifications

Appendix 5 and Appendix 6 provide case studies outlining the depth and breadth of research undertaken by CS&HISC in the development of the 2008 update of the Community Services Training Package, and the Aboriginal and Torres Strait Islander Health Worker qualifications.

In short, the review of CHCO2 for development of CHC08 involved consultation with five industry sector governance groups, over 1000 attendees at project events, more than 800 items of written feedback and generated 100 formal letters of support from key stakeholder organisations. In developing the Aboriginal and Torres Strait Islander Health Worker qualifications, CS&HISC established consultation networks in each state and territory for the development of these qualifications including the National Aboriginal Community Controlled Health Organisation (NACCHO) and its state/territory affiliate bodies and the Aboriginal and Torres Strait Islander Health Workforce Working Group

Accountability

Our current 2008-2011 DEEWR funding is to:

- provide integrated industry intelligence and advice to Skills Australia, government and enterprises on workforce development and skills needs
- actively support the development, implementation and continuous improvement of high quality training and workforce development products and services including Training Packages
- provide independent skills and training advice to enterprises, including matching identified training needs with appropriate training solutions
- work with enterprises, employment service providers, training providers and government to allocate a proportion of 450,000 additional training places.

Additional projects and funding

The CS&HISC has augmented funding provided by DEEWR for additional targeted competency and qualifications development, resources products, and career promotional materials. Funding for additional services has been provided, and tendered for, through key government agencies including the Australian Government Departments of Health and Ageing, Families Community Services, Housing and Indigenous Affairs, the Attorney General's Department and other branches of DEEWR. (*Appendix 7: Selected competency projects and resources developed between2008-2010*).

Case study

National Disability Workforce Plan

In June 2008, CS&HISC was invited to develop a workforce plan for the disability sector by the Community and Disability Ministers Advisory Council (CDSMAC). In June 2010, CS&HISC submitted the *Increasing Workforce Capacity* report to CDSMAC and the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) as part of the National

Disability Strategy. This report will guide future service design and funding in the disability sector and inform workforce and skills development policy.

Future-planning

CS&HISC captures the key drivers and challenges impacting workforce development through its annual Environmental Scan. CS&HISC works with funding and policy bodies other than DEEWR that have a stake in the skills of the community services and health workforces especially the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) and the Department of Health and Ageing (DoHA).

In 2011-2014, CS&HISC envisages key workforce development challenges, as identified by our *Environmental Scan 2010*, to be:

- Developing a workforce to support the shift towards service models that emphasise prevention, primary, community and home-based services
- Building management capacity in the community services and health industries
- Development new skills and roles to address increased complexity of client needs
- Increasing the use of assistant and advanced practitioner roles
- Supporting the policy focus on integrated models of service delivery
- Addressing conditions, recruitment and retention in community services
- Addressing labour shortages in rural and remote areas

Governance

The Board of CS&HISC is structured to maximise critical stakeholder engagement and balance positions and relationships between public employers, private employers and unions.

The 12-member Board draws its Directors equally from three categories of membership:

- Public (Government) Employers
- Private Employers
- Union Members

CS&HISC has the capacity to efficiently, effectively and independently co-ordinate the establishment of industry wide positions and views needed to support development of workforce development products, services and advice at the national level. (See Appendix 8: CS&HISC Board Representation)

Board Review

In late 2006, the CS&HISC Board undertook its first review of its governance arrangements including an evaluation of governance processes, committee structures procedures and Operations Manuals. In line with best-practice principles, a further 2010 governance review is currently underway.

ISC-Partnership Projects

CS&HISC participates in the Joint ISC Forum formed in 2005. The forum meets three to four times a year to progress specific issues, and meetings include CEOs and/or Chairs.

CS&HISC additionally participates in the following joint ISC groups:

- Technical Managers' Working Group
- Workforce Development Managers' Working Group
- Project Managers' Working Group
- Finance Managers' Working Group

All ISCs collaborate to avoid duplication of competency standards across Training Packages. CS&HISC activity in this area includes establishment of industry wide common competency standards for first aid and extensive use of standards from other industries. CS&HISC also meets regularly with its state/territory ITABs as a collaborative network, to collect and validate industry intelligence, discuss issues of national relevance and co-ordinate joint national activities.

Financial reserves

CS&HISC accumulates reserves through the sale of value-added resources supporting our core training package qualifications and skill sets; the provision of workshops and seminars assisting the implementation of training packages; contract management fees; and prudent investment. CS&HISC also sources additional government funding through competitive grants and tenders to fund competency and resource development that complement and enhance training packages. The extract from Audited Financial Statements below outlines the additional revenue streams CS&HISC that generate the surpluses that have built our reserves. Appendix 9 provides financial results for 2008 to 2009 compared to budget.

Note that: CS&HISC accumulated reserves are not built on unacquitted or unspent public funding. Public funders have the right to withhold or suspend any payment in whole or part if CS&HISC has not performed contract obligations or if CS&HISC has outstanding unacquitted money under any funding arrangement.

Under a practice of responsible governance, reserves have been accumulated to position CS&HISC to respond to immediate industry needs over and above those predicted in the triennial funding, and in the event that ISC funding through DEEWR be reduced or removed to enable CS&HISC to provide ongoing support to its industries until further funding can be secured, or while the organisation is wound-down.

Community Services & Health Industry Skills Council Audited Financial Statements (Extract)

	30-Jun	30-Jun	30-Jun
	2007	2008	2009
REVENUE			
DEEWR ISC Funding	1,256,115	1,844,230	2,492,879
Sale of Training Packages and Support Materials	178,016	54,392	254,346
Other Govt funded initiatives	1,565,775	2,233,576	1,826,080
Contract management fees	313,656	399,708	220,104
Conferences and workshops	183,742	306,890	663,580
Interest received	135,133	188,027	121,919
Other revenue	7,469	2,779	32,779
Total revenue	3,639,906	5,029,602	5,611,687
EXPENDITURE	3,228,226	4,977,050	5,144,982
SURPLUS attributable to reserves	411,680	52,552	466,705

Implementation of Specific Training Initiatives

Sustainability

One of several resolutions within the COAG-endorsed Australian Green Skills Agreement was to task all ISCs with embedding skills for sustainability throughout the national training packages by the end of 2010. CS&HISC adopted a broader, more holistic definition of the term 'sustainability' to encompass principles of workforce, economic and social sustainability in addition to environmental sustainability. Industry feedback has supported this move as innovative and appropriate, and likely to increase community services and health industry integration of sustainability principles into work roles and organisations.

In order to address sustainability skills CS&HISC audited the community services and health work roles as they are currently described by qualifications in the Training Packages. This audit revealed limited explicit coverage of principles of environmental sustainability, some coverage of economic and workforce sustainability and broad coverage of social sustainability. From this audit, seven recommendations were proposed and agreed by DEEWR for enhancing the Health and Community Services work roles described in the existing Training Packages. Draft versions of the Training Packages with proposed enhancements are currently available for consultation.

Enterprise Based Productivity Places Program

CS&HISC has brokered the allocation of EBPPP funding on behalf of the Commonwealth against key criteria relating to enhanced productivity and addressing industry workforce development challenges included in the CS&HISC Environmental Scan 2010.

The feedback provided by the ISCs earlier this year regarding the quantity of training needed to meet skill and occupation priorities encouraged DEEWR to increase Round 2 funding from a planned \$25M to \$50M. Combined Round 1 and Round 2 for the community services and health industries was \$4 million. This represents close to 800 training places across 500 individual organisations, covering 25 priority community services and health qualifications, and 13 sectors. Fifty-two percent have been allocated to small enterprises (less than 100 employees) of which a significant number of these have less than 10 employees or are self-employed.

Other initiatives linked to national priorities

CS&HISC has responded to other nationally-significant agendas by developing competencies to enhance core training packages. These include:

- national competency standards for oral health services to be delivered by non-oral heath specific workers. These competencies will support training to address priorities of *Healthy Mouths*, *Healthy Lives – Australia's National Oral Health Plan 2004-2013*
- competency standards for front line community services workers to enhance language, literacy and numeracy (LLN) ability of their clients are under development as part of the range of LLN responses established by DEEWR
- mental health worker peer support competency standards to support emerging roles of mental health consumers in supporting outcomes for clients in government and community mental health services
- a Family Day Care Workforce Development project to determine best practice training and assessment delivery for the family day care sector. Traditional classroom based education and training is not suited to this workforce and project outcomes will include new approaches to training and support the national children's services quality agenda.

Appendices

Appendix: 1

Publicly funded RTO enrolments in CHC02/99 Community Services Training Package and HLT07/02 Health Training Package

	2002	2003	2004	2005	2006	2007	2008
CHC02/99	78,905	84,435	90,965	99,275	107,310	113,530	124,733
HLT07/02	155	6,345	10,270	13,275	13,495	15,855	35,629

Source: National Centre for Vocational Education and Research (NCVER), 'Course enrolments in Community Services and Health Training Packages 2008', req. no. 22862. NCVER, Adelaide.

Appendix: 2

Occupational roles within the health and community services industries

Health Occupation Titles

Aboriginal and Torres Strait Islander

health education officer

Aboriginal and Torres Strait Islander health worker/community health

Aboriginal and Torres Strait Islander

health worker (community

health)/(specialist)

Aboriginal and Torres Strait Islander

hospital liaison officer

Administration supervisor/support/worker

Admissions clerk

Advanced testing and collection officer Allied health assistant/community worker

Ambulance attendant/call taker/officer

Ambulance paramedic

Ambulance community officer/support

officer

Ambulance transport attendant/officer

Ambulance Dispatcher Anaesthetic assistant

Anaesthetic or anaesthesia technician

Anaesthetic paramedical officer Area health education officer Area manager, health promotions

Aromatherapist

Aromatic medicine practitioner

Assistant Aboriginal and Torres Strait Islander community health worker

Assistant community health worker/women's health

Assistant cook
Assistant manager

Assistant massage therapist Assistant project officer

Assistive technology technicians

Audiometrist

Ayurveda practitioner/therapist/lifestyle

consultant/assistant

Botanical medicine practitioner

Business manager

Cancer notifications coordinator

Cardiac technician Cast technician

Casual ambulance officer

Chinese remedial massage practitioner

Cleaner Clerk

Clinical aromatherapist

Clinic coordinator (Aboriginal and Torres Strait Islander and Torres Strait Islander

health)

Clinical coding clerk

Communications call taker

Community based first responder

Coordinator Aboriginal and Torres Strait

Islander neighbourhood house Community development worker

Community health worker

Coordinator, Aboriginal and Torres Strait

Islander neighbourhood house

Coordinator, needle and syringe exchange

program

Coordinator, regional women's health Community health worker/coordinator (Aboriginal and Torres Strait Islander and

Torres Strait Islander health)

Community rehabilitation allied health

assistant

CSSD supervisor Data entry supervisor

Dental assistant

Dental laboratory assistant Dental prosthetist/technician

Dietetic assistant
Disease control officer
Dispensing technician
Distribution technician
Domestic assistant

Ednet community educator Emergency medical responder

EMS first responder

Emergency patient transport officer

Enrolled nurse

Environmental health worker/officer

Environmental health field support officer -

Aboriginal and Torres Strait Islander

communities

Environmental health officer

Environmental field support officer -Aboriginal and Torres Strait Islander

community

Environmental health worker Environmental technical officer Experienced specimen collector

Executive assistant First aid provider

Food service assistant/worker Gay education and outreach officer Gay education services officer/men's

support

Grounds maintenance worker Head hyperbaric technical officer Health care provider (Defence)

Health liaison worker

Health promotion officer/project officer

Health promotion project officer

Health sponsorship coordinator

Healthy housing worker Hearing aid audiometrist

Herbalist

Herbal medicine practitioner Homoeopathic practitioner Honorary ambulance officer

Hospital assistant

Hospital pharmacy assistant/technician Hyperbaric system maintenance manager Hyperbaric technical officer/Grade One/ Grade Two

Immunisation and TB coordinator Indigenous environmental health worker Indigenous public health officer

Indigenous environmental health worker

Indigenous public health officer Indigenous environmental health

worker/support worker

Industrial medic Instrument technician Intensive care paramedic

Kinesiologist

Kinesiology practitioner

Laboratory aide

Laundry leading hand/worker
Maintenance assistant/supervisor
Manager (Aboriginal and Torres Strait
Islander and Torres Strait Islander health)
Manager, migrant health services

Massage therapist/ therapy practitioner Medical assistant/Defence Medical records section leader Mobile intensive care ambulance

paramedic

Mortuary assistant/attendant/ technician Natural therapist/ Naturopathic practitioner

Natural medicine practitioner Neurophysiology technician

Nursing assistant Nursing support worker

Nutritional medicine practitioner/therapist Occupational therapy assistant/officer

Operating theatre technician

Optical dispenser/mechanic/technician

Orderly

Outreach worker, needle and syringe

exchange program

Pathology

assistant/collector/courier/technician Patient service/support attendant Patient transport attendant/officer

Peer educator

Pharmacy assistant/technician

Physiotherapy assistant

Phytotherapist Plaster orderly Podiatry assistant Porter

Post mortem assistant Practice manager

Primary health care worker (Aboriginal and Torres Strait Islander and Torres

Strait Islander health)

Program manager (Aboriginal and Torres Strait Islander and Torres Strait Islander health)

Reflexologist

Regional programs coordinator Registered Nurse Division 2

Registry officer, cancer surveillance Rehabilitation engineering technician Remedial massage therapist/practitioner

Community Services Occupation titles

Aboriginal and Torres Strait Islander community development worker Aboriginal and Torres Strait Islander

education officer

Aboriginal and Torres Strait Islander

housing worker

Aboriginal and Torres Strait Islander language and culture teaching assistant Aboriginal and Torres Strait Islander manager (small-medium size

organisation)

Aboriginal and Torres Strait Islander

tenancy worker

Aboriginal family consultant
Aboriginal or Torres Strait Islander
community development worker
Accommodation support worker
Activities coordinator/officer

Administrative assistant/officer/support

worker

ADR practitioner

Advanced practitioner in social housing

Advocacy worker

Alcohol and other drugs telephone

counsellor

Alternative care workers Assessment officer

Assessor

Assistant community services workers

Assistant coordinator
Assistant hostel supervisor

Assistant in nursing

Assistant OSHC coordinator

Assistant team leader

Associate employment consultant

Authorised supervisor (children's services)

Barrister mediator

Behavioural support officer

Care assistant/worker Care coordinator Care manager

Care service employee Care supervisor

Care team leader/worker

Career and transition services coordinator

Career development practitioner

Career information officer

Case coordinator
Case manager
Case support worker

Case worker

Case worker or manager

Celebrant Centre manager

Centre manager (children's services)

Chief executive officer
Child and family counsellor
Child and family support service

coordinator

Child care assistant/worker Child development worker

Child protection worker/support worker Child protection worker/practitioner

Child safety officer Children's adviser

Children's contact facilitator/support

worker

Children's service director/manager Children's services coordinator Children's/youth support worker

Civil celebrant

Clerical worker/assistant/contact

Client intake worker Client service assessor Client service officer

Community access coordinator Community advisory worker

Community builder

Community care manager/officer/worker Community development worker (youth) Community education manager/worker

Community house worker Community legal officers

Community leisure coordinator/officer Community rehabilitation and support

worker

Community services manager/worker Community worker/support worker

Community visitors Contact officers

Contact service practice manager

Coordinator family services

Coordinator relationship education

services

Coordinator voluntary work

Coordinator youth and family services

Coordinator youth services Coordinator social housing Coordinator volunteer programs

Cottage parent Counsellor

Couples counsellor Court coordinator Court support worker

Customer service staff/officer

Day activity worker Detoxification worker Development officer

Direct care

Director (children's services)

Disability development and support officer

Disability service officer/worker Dispute resolution facilitator Diversional therapist/assistant

Divorce counsellor Domestic assistant

Domestic violence help line telephone

counsellor

Domestic violence worker Drug and alcohol worker

Early intervention homelessness worker

Economic development manager

Education assistant

Education assistant (special needs) Education officer/support worker

Education worker

Employment consultant

Employment consultant – case manager Employment consultant – employer

marketing and liaison

Employment consultant – job placement Employment consultant – training Employment coordinator (disability) Employment services administrative

support

Employment services program manager

Employment services receptionist Employment services site/branch

manager

Employment services team leader

Entry level case worker

Executive officer

Family and child mediator Family and couples mediator Family assessment worker

Family celebrant
Family counsellor
Family day care worker
Family law mediator

Family relationship counsellor Family relationship support worker Family relationship worker

Family relationships mediator/support

worker

Family skills worker

Family support worker/protection

planner/prevention worker

Family support/prevention worker Family/parent educator/facilitator

Fathers' worker Field officer

Financial counsellor
Food services deliverer
Foster parent/carer
Funeral celebrant

Gardener/grounds person

Gay and lesbian help-line telephone

counsellor

Group coordinator/facilitator

Group leader/worker/team coordinator

Health education officer Home based care worker Home care assistant/worker

Home helper

Home maintenance worker

Home tutor

Homeland teaching assistant

Hostel supervisor Housekeeping assistant Housing manager/assistant

Housing services officer/support worker

In-home respite care worker Inclusion support facilitator Indigenous connection worker

Indigenous family consultant/facilitator

Indigenous housing officer

Indigenous language and culture teaching

assistant

Indigenous youth worker Information and referral worker

Information worker

Intake and referral worker (Aboriginal)

Job coordinator

Job search training consultant

Juvenile justice coordinator/court officer

Language worker Laundry assistant Leisure officer

Leisure services coordinator / manager

Lifestyle support officer

Literacy worker

Local support coordinator Loss and grief celebrant Manager of an ADR service

Manager, volunteers

Marriage and family educator

Mediation case worker

Men's help line telephone counsellor

Men's service officer

Mental health community worker Mental health outreach worker

Mental health rehabilitation support worker

Mental health support worker

Mobile assistant

Nanny

Neighbourhood centre coordinator/manager/worker Neighbourhood renewal workers Night/community patrol workers

Non-residential case worker/team leader

Nursing assistant OSHC assistant

Out of home care provider

Outcomes manager
Outreach officer

Outreach worker/support worker Outside school hours care assistant/coordinator/supervisor

Para-legal workers
Parent educator

Pastoral care counsellor/manager/worker

Personal adviser

Personal care assistant Personal care giver Personal care worker Planned activity assistant

Play leader

Playgroup supervisor

Policy worker, social housing Problem gambling worker Program area manager

Program coordinator – social programs Program coordinator or manager Program development worker

Program leader

Program leader (children's services)

Program manager/officer

Program or service manager/coordinator

Program support worker

Project manager

Project officer (life enhancement team)

Property worker/asset manager

(specialist)

Protective case worker
Provision of emergency relief
Psycho-educational/social trainer

Reception/front desk staff Recreation activities officer/assistant/leader

Recreational youth activities worker

Referrals manager Relationship educator

Relationship, marriage and family

educator

Residential aide/care officer / support

worker

Rural financial counsellor

School support officer (working with

children with disabilities)
Section supervisor

Secure environment worker Senior case manager/worker Senior client service officers –

generalist/specialist

Senior community care worker

Senior disability worker

Senior employment consultant Senior financial counsellor Senior housing officer/manager Senior personal care assistant

Senior play leader

Senior youth justice officer

Senior youth officer/worker/chaplain

Separations counsellor Service coordinator Service director/manager Service or program coordinator Sessional contact worker/supervisor

Settlement worker

Shift supervisor/team leader Social educator/trainer Social welfare worker Specialist mediation worker

Supervisor

Support facilitator Support worker

Support worker (children with disabilities)/(specialist)
Support worker residential
Supported housing worker
Teacher aide/assistant
Team leader, social housing

Team supervisor

Tenancy advice manager

Tenancy worker/administration worker Tenant advice and advocacy service

coordinator

Tenants working in a range of areas

Therapeutic worker

Training and placement officer Training manager, social housing

Transport coordinator
Transport support worker

Unit coordinator/manager/leader Vacation care coordinator/ supervisor

Visits coordinator

Volunteer program manager Volunteer tenant manager

Welfare rights worker/ support worker

Welfare worker

Workers in peak organisations

Workplace chaplain

Youth alcohol and other drugs worker

Youth and family resource officer/service

worker

Youth case worker (community health service setting – non residential)
Youth help line telephone counsellor

Youth housing support worker Youth justice area manager

Youth justice officer
Youth residential worker
Youth support case worker
Youth work team leader
Youth worker/juvenile justice

Schools program

Screening Audiometrist Seating technician

Senior Aboriginal and Torres Strait

Islander health worker

Senior cleaner Senior clerk

Senior clinical coder

Senior hyperbaric technical officer Senior instrument technician

Senior kitchen hand

Senior mortuary assistant/technician

Senior pharmacy technician Senior project officer

Senior theatre technician Senior theatre wardsperson Shiatsu practitioner/therapist

Sleep technician

Specialist kinesiology practitioner

Specialist specimen

collector/officer/reception assistant

Speech pathology assistant

Sterilisation

supervisor/assistant/technician Stolen generation worker

Stores assistant

TCM remedial massage practitioner/therapist

Team leader for clinical services

Technical assistant

Technical facility manager

Theatre support
Therapy assistant
Tui Na practitioner
Volunteer first aider

Volunteer ambulance officer Ward assistant/clerk/Wardsperson Western herbal medicine practitioner

Women's health educator Workplace first responder

Appendix: 3

Industry Consultation summary July 2008-June 2010 - attached as a separate document

Appendix: 4

Other Peak Bodies CS&HISC engages with in the development of research reports, competency development, and training packages review:

Other Peak Industry Bodies

Aged & Community Services Australia (ACSA)

Aged Care Association Australia (ACAA)

Allied Health Professions Australia (AHPA)

Audiology Society of Australia (ASA)

Australia and New Zealand Association of Neurologists (ANZAN)

Australian Association of Massage Therapists (AAMT)

Australian Association of Social Workers (AASW)

Australian Children's Contact Services Association (ACCSA)

Australian Commercial Dental Laboratories Association Inc (ACDLA)

Australian Council of Social Services (ACOSS)

Australian Dental Association Inc (ADA)

Australian Health Promotion Association (AHPA)

Australian Healthcare and Hospitals Association (AHHA)

Australian Homoeopathic Association (AHA)

Australian Kinesiology Association Inc (AKA)

Australian Medical Association (AMA)

Australian Natural Therapists Association (ANTA)

Australian Private Hospitals Association (APHA)

Australian Rehabilitation & Assistive Technology Association (ARATA)

Australian Traditional-Medicine Society (ATMS)

Dental Hygienists Association of Australia Inc (DHAA)

Health Information Management Association of Australia Ltd (HIMAA)

National Aboriginal Community Controlled Health Organisations (NACCHO)

National Association of Community Legal Centres (NACLC)

National Association of Tenants Organisations (NATO)

National Enrolled Nurse Association (NENA)

National Rural Health Alliance (NRHA)

Network of Alcohol & Other Drug Agencies (NADA)

Professional Aboriginal Health Worker Association of SA Inc (PAHWA)

Peak training bodies including:

Australian Council for Private Education and Training (ACPET)

Enterprise Registered Training Organisations Association (ERTOA)

TAFE Directors Australia (TDA)

Specific skills and VET agencies:

National Quality Council

Skills Australia

State and Territory Training Authorities

State and Territory Industry Training Advisory Bodies

Appendix: 5

Case Study - Community Services Training Package Review 2006-2008 industry engagement

The Community Services Training Package Review was a two year project resulting in updated national qualifications and competency standards in the new Package (CHC08). The last review was undertaken in 2002 and significant changes in industry had bypassed the CHC02 version of the Package. The last decade saw massive growth in the community services industry and greater complexity in client needs. One result of this growth was the expansion of the role of government as service purchaser as well as provider/employer. The large not for profit sector continued to adapt and expand to meet increased service provision over this period but without the resources to match increased organisational and workforce capacity.

The updated CHC08 Community Services Training Package provided the flexible skills framework for continued growth in the community services industry and a foundation for new approaches to workforce development.

Highlights on how the new CHC08 directly impacted service delivery and workforce reform include:

- Forty new skill sets complementing qualifications, supporting horizontal and vertical career pathway options and new service design through targeted competencies
- New Diploma of Counselling reflecting hard-won agreement from the sector, new career pathways into higher level skills in VET and higher education and replacement of a significant number of accredited courses
- Children's Services qualifications revised to better reflect work focusing on either early or middle childhood and with a skill set pathway for child care workers working with children aged from 0-12 years. Especially relevant for rural or remote environments
- A revised suite of Certificate III and IV qualifications in aged care, disability and home and community care with access to new medication administration and complex care competencies supporting employers unable to recruit enrolled and registered nurses and supporting skills recognition for traditionally low-paid but high value roles
- An integrated approach to child, youth and family intervention with streams for child protection, family support and statutory child protection across Certificate IV, Diploma and Vocational Graduate Certificate levels
- Updated mental health qualifications, competencies and skill sets for mental health including a new Diploma of Community Services (Mental Health) and integration of alcohol and other drugs work and mental health competencies reflecting the prevalent dual presentation of these issues in community services
- Skill sets in areas not previously addressed, such as financial literacy and problem gambling and available for a range of community services workers
- New integrated management qualifications and competencies ranging from a team leadership skill set to the Vocational Graduate Diploma Community Sector Management reflecting executive management and leadership roles in the community services industry
- New vocational graduate level qualifications supporting high level skills for client assessment and case management and statutory child protection and establishing career pathways spanning both the VET and higher education sectors.

Appendix: 6

Case Study – Aboriginal and Torres Strait Islander Health Worker qualifications

From 2002 to 2006, CS&HISC worked with key stakeholders to develop nationally endorsed qualifications to define the emerging work roles of Aboriginal and Torres Strait Islander Health Workers. Prior to these qualifications being developed, the work roles, occupational titles and status of workers in this area varied according to jurisdictional and workplace requirements. The new qualifications would reflect work roles based in rural or urban environments and for the delivery of limited health care services to clients living in communities that are isolated from mainstream health services.

Eight qualifications, across several levels, were developed to cover the Aboriginal Health Worker and Torres Strait Islander Health Worker roles. This provided improved career pathways for Aboriginal and Torres Strait Islander Health Workers both within Aboriginal and Torres Strait Islander Health work and the broader health industry. The new qualifications also deliver on recommendations of the National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework developed in 2002. Other structures established under this framework include the national Aboriginal Health Worker and Torres Strait Islander Health Worker Association and the proposed addition of Aboriginal Torres Strait Islander Health Worker to the national registration and accreditation scheme for the health professions in 2012. The Aboriginal and/or Torres Strait Islander Health Work qualifications and competency standards included in the HLT07 Health Training Package are critical to these structures.

Funding for development of these qualifications from the then Australian National Training Authority in 2002 was insufficient and the CS&H ISC secured the required additional funding from the Commonwealth Department of Health and Ageing (DoHA).

Appendix: 7

Selected competency projects and resources developed between 2008-2010

- Community Services Workers and Volunteers Working with clients with Language Literacy and Numeracy Needs
- Oral Health Competencies for the Community Services and Health workforce
- Development and Humanitarian Assistance
- Respite Coordination
- Mental Health Peer Support
- Medical Imaging Assistance
- Community Rehabilitation Assistance
- Renal Care
- Disability Workforce Project
- Family Day Care Workforce Development Project
- Mental Health Articulation Project
- Impact of Aboriginal Health Worker qualifications in NSW
- MAGIC Employment for: People with a disability, Mature job seekers, Parents returning to the workforce
- Careers that Matter website
- Pathways that Matter website
- Population Health Qualifications Resource Kit
- Aboriginal and/or Torres Strait Islander Health Worker
- Chronic Disease Self Management competency implementation resources

Appendix: 8

CS&HISC Board Industry Representation – attached as a separated document

Appendix: 9
Financial Report for the Period 1 July 2008 to 30 June 2009

	Actual	Approved DEEWR	Variance
Activity Undertaken Utilising DEEWR ISC Funding .		Budget	
Income	2 402 070	2.424.002	(004 000)
DEEWR funding allocated as Income	2,492,879	3,424,802	(931,923)
Interest Income	121,919	100,000	21,919
Sundry income	32,779	0	32,779
Total Income	2,647,577	3,524,802	(877,225)
Expenses			
Wages, Salaries and On Costs	1,508,869	1,802,755	293,886
Communication Expenses	81,366	107,790	26,424
Consultants Fees	557,213	778,454	221,241
Contract Management Fees	124,699	20,000	(104,699)
Premises Expenses	48,899	43,845	(5,054)
Office Equipment Expensed	7,957	5,830	(2,127)
Depreciation & Amortisation	96,560	80,700	(15,860)
Office Supplies	76,252	106,030	29,778
Travel	241,637	235,070	(6,567)
Audit Accounting & Insurance	180,397	73,909	(106,488)
Meeting Expenses	47,852	45,846	(2,006)
Other Expenses	113,930	207,467	93,537
Total Expenses	3,085,631	3,507,696	422,065
DEEWR ISC Funding Operating Result/(Loss)	(438,054)	17,106	(455,160)
Additional Activities Undertaken Income			
Sale of Training Packages and Support Materials	254,346	200,000	54,346
Other Government Funded Initiatives	1,826,080	2,745,310	(919,230)
Contract Management fees	220,104	242,992	(22,888)
Sundry Income	663,580	450,000	213,580
Total Income	2,964,111	3,638,302	(674,191)
Expenses			
Expenses attributed to Additional Activities	2,059,352	3,117,212	1,057,860
Total Expenses	2,059,352	3,117,212	1,057,860
		-,,	
Additional Activities Operating Result/(Loss)	904,759	521,090	383,669
Surplus attributable to Reserves	466,705	538,196	(71,491)